

### UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

## FORM D

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OMB APPROVAL	JMBER: 3235-0076 August 30, 2008
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expires: August 30, 2008	3
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nours per response16.00	)

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# NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D. **SECTION 4(6), AND/OR**

SEC USE ONLY **Prefix** Serial DATE RECEIVED UNIFORM LIMITED OFFERING EXEMPTION

Name of Offering (□ check if this	is an amendment and nar	ne has changed, and	indicate ch	ange.)	
EnTrust Diversified Select Equity I	und Ltd Offering of	Shares, issued in c	lasses		
Filing Under (Check box(es) that app	ly): 🔲 Rule 504	☐ Rule 505	☑ Rule 50	06 □ Sect	ion 4(6) DULOE
Type of Filing:  New Filing: SEC	, IL	Amendment:	<u> </u>		Wail Processing
	A. BASIC I	DENTIFICATION	DATA		Section
1. Enter the information requested ab	out the issuer				
Name of Issuer (  check if this is	an amendment and name	has changed, and in	ndicate chan	ge.)	SEP US ZUUD
EnTrust Diversified Select Equity I	Tund Ltd.				
Address of Executive Offices		et, City, State, Zip C		Telephone Nu	mber (Including Area Code)
c/o Admiral Administration Ltd., A	dmiral Financial Cente	r, 5 <sup>th</sup> Floor, 90 For	t Street,	1-345-814-59	
P.O. Box 32021 SMB, Grand Caym	an, Cayman Islands				101
Address of Principal Business Operat	ions (Number and Stree	et, City, State, Zip C	Code)	Telephone Nu	mber (Including Area Code)
(if different from Executive Offices)	<b>EnTrust Partners Offsl</b>	hore LLC, 717 Fift	h	1-212-888-10	40
Avenue, New York, NY 10022					
Brief Description of Business: Inves	stments in securities.				
Type of Business Organization					
□ corporation	☐ limited partnership, a	lready formed	X	other (please	specify): Exempted Cayman
☐ business trust	☐ limited partnership, to	be formed			Islands Company
		Month Yea	<u>r_</u>	PRO	CESSED
Actual or Estimated Date of Incorporat	ion or Organization	0 8 0 5	12	Actual D	Estimated
Jurisdiction of Incorporation or Organ	ization: (Enter two-letter	U.S. Postal Service	abbreviatio	n for State: SE	P 1 2 2008
	Canada: EN for other for				$\sim$

#### GENERAL INSTRUCTIONS Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. Or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

This notice shall be used to indicate reliance on the Uniform Limited Offering exemption (ULOE) for sales of securities in those state that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

2. Enter the information requested for the following	g:		<u></u>	
Each promoter of the issuer, if the issuer ha		the past five years;		
Each beneficial owner having the power to			10% or more o	f a class of equity securities of
the issuer;				· ·
<ul> <li>Each executive officer and director of corpe</li> </ul>		rate general and managing	general partner	rs of partnership issuers; and
Each general and managing partner of partr		·		
Check Box(es)that Apply:   Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or
				Managing Partners
Full Name (Last name first, if individual)			<del></del>	
EnTrust Partners Offshore LLC (the "Invest	ment Advisor")			
`	<del></del>	3.1.		<del></del>
Business or Residence Address (Number and c/o EnTrust Partners Offshore LLC, 717 Fift				
· · · · · · · · · · · · · · · · · · ·				
Check Box(es)that Apply: ☐ Promoter I	🛘 Beneficial Owner	☐ Executive Officer	☑ Director	☐ General and/or
<b>(</b> `				Managing Partners
Full Name (Last name first, if individual)				
Hedley Cook, Graham		<i>*</i>		:
	0	7.1.		
Business or Residence Address (Number and c/o Admiral Administration Ltd., Admiral Finance			1 SMB, Grand (	Cayman, Cayman Islands
Check Box(es)that Apply:	☐ Beneficial Owner	☐ Executive Officer	☑ Director	☐ General and/or
				Managing Partners
Data to a constant of the state			<del></del>	
Full Name (Last name first, if individual)				
Nolan, Allison B.				70
Business or Residence Address (Number and				
c/o Admiral Administration Ltd., Admiral Financ	ial Center, 5 <sup>th</sup> Floor, 90 I	Fort Street, P.O. Box 3202	1 SMB, Grand (	Cayman, Cayman Islands
Check Box(es)that Apply:  Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or
413				Managing Partners
F-H-N	<del></del>	<del></del>	_ <del></del> _	
Full Name (Last name first, if individual)				1
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Business or Residence Address (Number and	Street, City, State, Zip (	Code)		
Check Box(es)that Apply:	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or
				Managing Partners
Full Name (Last name first, if individual)				
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Business or Residence Address (Number and	Street, City, State, Zip (	Code)		
Check Box(es)that Apply:  Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or
				Managing Partners
Full Name (Leat some Seat (Sindividual)				
Full Name (Last name first, if individual)				
Business or Residence Address (Number and	Street, City, State, Zip	Code)		
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Check Box(es)that Apply: ☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or
				Managing Partners
Dall Name (Landaum Grad 101 at 11 at				
Full Name (Last name first, if individual)				
	<del>_</del>			···-
Business or Residence Address (Number and	Street, City, State, Zip	Code)		
		·		

A. BASIC IDENTIFICATION DATA

				В.	INFORMAT	TION ABOU	TOFFERIN	(G				
1 Hac the	issuer enla	l or does th	ne issuer int	end to sen	d to non-ec	credited in	vestare in t	his offering	<b>1</b> ?	,	Yes	No ⊠
1. 1145 1110	133461 3010	i, or does ii.			in Appendi:					,		
7 What is	the mini-	um invoces					_				<b>ዩ</b> ነ ለ	ስስ ስስስ <b>*</b>
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•			the discretion								37	<b>N</b> I-
										,		_
		-	-	_								
comm If a pe list the dealer	ission or si rson to be l name of tl	milar remu listed is an he broker o let forth the	neration fo associated r dealer. If informatio	r solicitation person of a more than	on of purch broker or five (5) pe	asers in co dealer regisersons to be	nnection watered with	ith sales of the SEC ar	securities  d/or with  person of	r indirectly, s in the offer a state or sta such a broke APPLICAB	ing. ites, r or	
	<u> </u>											
Business	or Residen	ce Address	(Number	and Street	, City, State	e, Zip Code	:)					
Name of	Associated	Droken en 1	Doolo-		<del></del>	<del></del>		<del></del>		<del></del>		
Name of	Associated	DIOKET OF I	Dealer									
			licited or Inte dual States)							□All States		
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	(HI)	[ID]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
Full Nam	e (Last nan	ne first, if i	ndividual)					. <del></del>		<del></del>	•	·
Business	or Residen	ce Address	(Number	and Street	t, City, Stat	e, Zip Code	<del>;)</del>					
Name of	Associated	Broker or	Dealer	<del></del> -			<u>, , , , , , , , , , , , , , , , , , , </u>	<del></del>		<del></del>	_	
			licited or Inte							□All States	<u> </u>	<u> </u>
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	(NE)	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[Wi]	[WY]	[PR]
Full Nam	e (Last nan	ne first, if i	ndividual)			· · · · · · · · · · · · · · · · · · ·	<del>.</del>		<u></u>	<del>***</del> *	<del>-</del> +-	
Business	or Residen	ce Address	(Number	and Stree	t, City, Stat	e, Zip Cod	e)		·			

Name of Associated Broker or Dealer

Type of Security	Aggregate Offering  Amount	Amount Already Sold
Debt	\$0	\$ <u>0</u>
Equity	\$0	\$ <u>0</u>
☐ Common ☐ Preferred	4.0	<b>4</b> 0
Convertible Securities (including warrants)	\$ <u>0</u>	\$0
Partnership Interests	\$ 000,000,000	\$0
Other (Specify)Ordinary Shares, issued in classes	\$5,000,000,000¹	\$ 28,000,000
Total	\$ <u>5,000,000,000</u>	\$ <u>28,000,000</u>
Answer also in Appendix, Column 3, if filing under ULOE		
2. Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero".		
Accredited Investors	Number Investors	Aggregate Dollar Amount of Purchases \$ 28,000,000
Non-accredited Investors.	0	\$ <u>28,000,000</u> \$ <u>0</u>
Total (for filings under Rule 504 only)	N/A	\$ N/A
Answer also in Appendix, Column 4, if filing under ULOE	IV/A	J <u>N/A</u>
sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first		
sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1.	Type of Security	Dollar Amoun Sold
sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first	Type of Security N/A	
sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1.  Type of offering	Security	Sold \$ 0
sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1.  Type of offering Rule 505	Security N/A	\$ 0 \$ 0
Type of offering Rule 505	Security N/A N/A	Sold
sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1.  Type of offering Rule 505	Security N/A N/A N/A	\$ 0 \$ 0
Type of offering Rule 505 Regulation A Rule 504 Total  Total  A Rurnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.  Transfer Agent's Fees.	Security N/A N/A N/A N/A	\$ 0 \$ 0 \$ 0 \$ 0 \$ 0
Type of offering Rule 505 Regulation A Rule 504 Total Total  Total  Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.	Security N/A N/A N/A N/A	\$ 0 \$ 0 \$ 0 \$ 0 \$ 0
Type of offering Rule 505	Security N/A N/A N/A N/A	\$ 0 \$ 0 \$ 0 \$ 0 \$ 0 \$ 0
sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1.  Type of offering Rule 505	Security N/A N/A N/A N/A  N/A   N/A	\$ 0 \$ 0 \$ 0 \$ 0 \$ 0 \$ 0 \$ 0 \$ 50,000
sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1.  Type of offering Rule 505	Security N/A N/A N/A N/A  N/A  O  O	\$ 0 \$ 0 \$ 0 \$ 0 \$ 0 \$ 0 \$ 0 \$ 50,000 \$ 0
sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1.  Type of offering Rule 505	Security N/A N/A N/A N/A  N/A  O  O	\$ 0 \$ 0 \$ 0 \$ 0 \$ 0 \$ 0 \$ 50,000 \$ 0 \$ 0
sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1.  Type of offering Rule 505	Security N/A N/A N/A N/A O/A O/A O/A O/A O/A O/A O/A O/A O/A O	\$ 0 \$ 0 \$ 0 \$ 0 \$ 0 \$ 0 \$ 0 \$ 50,000 \$ 0 \$ 0 \$ 0

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS
1. Enter the aggregate offing price of securities included in this offering and the total amount already sold.

estion 1 and the total expenses furnished in response to Part ( "adjusted gross proceeds to the issuer"					\$_4	4,999,946,000
each of the purposes shown. If the amount for any purpose I check the box to the left of the estimate. The total of the	e is not known, furnish an es he payments listed must equ	timat	e			
			Officers, Directors, Affiliates	& &		Payments To Others
		_				\$_0
						\$ <u>0</u>
	• •		\$ <u>0</u>			\$ <u>0</u>
Construction or leasing of plant buildings and facilities	***************************************		\$ <u>0</u>			\$ <u>0</u>
offering that may be used in exchange for the assets or secu	rities of another		\$ <u>.0</u>	<u> </u>		\$ 0
Repayment on indebtedness		\$ <u>0</u>			\$ 0	
			\$ <u>0</u>			\$ <u>0</u>
Other (specify): Investments in securities.		\$ <u>0</u>		X	\$ <u>4,999,946,000</u>	
			\$ <u>0</u>	···	X	<b>\$</b> 4,999,946,000
Total Payments Listed (column totals added)			×	\$ <u>4.</u>	999,9	946,000
D. FEDE	RAL SIGNATURE					
wing signature constitutes an undertaking by the issuer to fu	rnish to the U.S. Securities	Com	nission, upor			
Issuer (Print or Type) Signature				Date		
EnTrust Diversified Select Equity Fund Ltd.				25	7 K	upun 200
ne of Signer (Print or Type)	Title of Signer (Print or 7	(ype)				<del></del> -
	Salaries and fees	Salaries and fees	Salaries and fees	licate below the amount of the adjusted gross proceeds to the issuer used or proposed to be used each of the purposes shown. If the amount for any purpose is not known, furnish an estimate of check the box to the left of the estimate. The total of the payments listed must equal the usted gross proceeds to the issuer set froth in response to Part C - Question 4.b above.  Payments Officers, Directors, Affiliates Salaries and fees	licate below the amount of the adjusted gross proceeds to the issuer used or proposed to be used each of the purposes shown. If the amount for any purpose is not known, furnish an estimate of check the box to the left of the estimate. The total of the payments listed must equal the usted gross proceeds to the issuer set froth in response to Part C - Question 4.b above.  Payments To Officers, Directors, & Affiliates  Salaries and fees	licate below the amount of the adjusted gross proceeds to the issuer used or proposed to be used each of the purposes shown. If the amount for any purpose is not known, furnish an estimate of check the box to the left of the estimate. The total of the payments listed must equal the usted gross proceeds to the issuer set froth in response to Part C - Question 4.b above.    Payments To Officers, Directors, & Affiliates   So

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

Enter the difference between the aggregate offering price given in response to Part C -

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